

State of Minnesota

**District Court
Probate Division**

County of _____

Judicial District: _____

Court File No. _____

Case Type: 14, Conservatorship

In Re: ☐ Guardianship

☐ Conservatorship of

Affidavit of Personal Service

_____, 20____ the undersigned personally served the _____

(document served) on the ward or protected person and that the present address and telephone number of
the ward or protected person is: _____

_____.

Sworn/affirmed before me on

Signature of Affiant (Guardian/Conservator or other person
who serves the notice on the ward/protected person.)

_____.

Notary Public \ Deputy Court Administrator

(Notary Seal)

**THIS PAGE MUST BE COMPLETED AND RETURNED TO THE COURT WITH A
COPY OF THE DOCUMENT GIVEN TO THE WARD / PROTECTED PERSON**